

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   | B.W.     | 249    | 7/13/99 |
| O.I.P.E. CLASSIFIER |          | 15     | 7/15/99 |
| FORMALITY REVIEW    | BD       | 60759  | 7-23    |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date    |
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If more than 150 claims or 10 actions  
 staple additional sheet here